

Work Order ID 107145

107145

Page 1

September-23-13 11:09:50 AM

Item ID: D3940-1 Accept *N900040100* Setup Start *NS1*
Revision ID:
Item Name: Floor Protector (407) Stop *NS2*
Start Date: 9/18/13 Start Qty: 1.00 *1* Cust Item ID:
Required Date: 9/23/13 Req'd Qty: 1.00 *1* Customer:

Reference:

Approvals: Process Plan: ML5 Date: 13-09-24 Tooling: Date: Run Start *NR1*
QC: Date: SPC (Y/N): Date: Stop *NR2*

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|---------------------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|------------------|
| Draw Nbr | Revision Nbr | | | | | | | | |
| 100 | | 0.00 | | | | | | | DAS 07 089 |
| *100* | | | 30*51 | | | x1 | | | (13)10/02 |
| Hand Thermo | Memo | 0.00 | | | | | | | |
| Hand Finishing Thermoforming | 1-Cut Sheet to required Blank size | | | | | | | | |
| 105 | | 0.00 | | | | | | | DAS 07 089 |
| *105* | Dry Material | | | | | x1 | | | (13)10/02 |
| Hand Thermo | Memo | 0.00 | | | | | | | |
| Hand Finishing Thermoforming | Dry Sheet as per QSI022 POLYCARBONATE | | | | | | | | |
| | Temp: 240°F | | | | | | | | |
| | Time IN: 7:00 am | 13/10/01 | | | | | | | |
| | Time OUT: 7:00 am | (13)10/02 | | | | | | | |

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| Work Order: _____ | | | | DISPOSITION | | AGAINST DEPARTMENT/PROCESS | | | | | | | | | | | |
|--|------|------|-----|--|--|------------------------------------|--|--|--------------------------------------|--------------|--------------|--|--|--|--|---|--|
| | | | | Rework <input type="checkbox"/> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | | Engineering <input type="checkbox"/> | | | | | | | | |
| | | | | Scrap <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coor. <input type="checkbox"/> | | Quality <input type="checkbox"/> | | | | | | | | |
| | | | | Use-as-is <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | | Other <input type="checkbox"/> | | | | | | | | |
| | | | | Work Order Update <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | | Initial Chief Eng | Action Description | | Sign & Date | Verification | QC Inspector | | | | | | |
| Doc/Data | | | | | | | | | | | | | | | | | |
| Equip/Tooling | | | | | | | | | | | | | | | | | |
| Operator | | | | | | | | | | | | | | | | | |
| Material | | | | | | | | | | | | | | | | | |
| Setup | | | | | | | | | | | | | | | | | |
| Other | | | | | | | | | | | | | | | | | |
| Process | | | | | | | | | | | | | | | | | |
| Supplier | | | | | | | | | | | | | | | | | |
| Training | | | | | | | | | | | | | | | | | |
| Unapproved | | | | | | | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | | | | | | | |
| Landing Gear | | | | General | | | | | | | | | | | | | |
| <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | | | | <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | | | | | | | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | | | | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled | |
| | | | | | | | | | | | | | | | | <input type="checkbox"/> Other | |

Work Order ID 107145

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Item ID: D3940-1

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Floor Protector (407)

Stop

NS2

Start Date: 9/18/13 Start Qty: 1.00

1

Cust Item ID:

Required Date: 9/23/13 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--|--|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 110 *110* Thermoform | Memo 1-Machine Set-Up 2-Pre-heat Tool to required temp. 3-Thermoform as per Dwg and Folio #FTA042 using tool DT9502 Dwg Rev: <u>A</u> Folio Rev: <u>B</u> | 0.00 | | | | x1 | | | Dh 13/10/02 |
| 140 *140* Hand Thermo | Memo 1-Trim to finished dimensions as per Dwg | 0.00 | | | | x1 | | | 20 13/10/03 |
| 150 *150* QC Quality Control | QC2- Inspect parts off machine FAI/FAIB Memo Complete FAI document | 0.00 | | | | x1 | | | 20 13/10/03 |

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: Date:

QA Closed: _____ Date: _____

| Work Order: _____ | | | DISPOSITION | | | AGAINST DEPARTMENT/PROCESS | | | | | |
|------------------------------|---------|------|---|--|--|--|---|---------------------------------|----------------------|--------------------|--|
| | | | Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> | Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> | Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> | Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> | | | | |
| Part No. _____ | | | | | | | | | | | |
| NCR No. _____ | | | | | | | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | |
| Doc/Data | | | | | | | | | | | |
| Equip/Tooling | | | | | | | | | | | |
| Operator | | | | | | | | | | | |
| Material | | | | | | | | | | | |
| Setup | | | | | | | | | | | |
| Other | | | | | | | | | | | |
| Process | | | | | | | | | | | |
| Supplier | | | | | | | | | | | |
| Training | | | | | | | | | | | |
| Unapproved | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | |
| Landing Gear | | | | General | | | | | | | |
| Bending | General | | | Bend | General | | | Grain | General | | |
| Centre Not Concentric to O/S | | | | BOM/Route | | | | Hardware | Ovalized | Pressure/Forced | |
| Cracks | | | | Broken/Damaged | | | | Inspection Incomplete | Over/Under tolerance | Temperature/Cure | |
| Crushed/Crimped | | | | Burrs | | | | Instructions Incomplete/Unclear | Part Incorrect | Weld | |
| Cuffs | | | | Contamination | | | | Maintenance | Part Lost/Missing | Wrong Stock Pulled | |
| Heat Treat | | | | Countersink | | | | Mislabeled | Part Moved | | |
| Inspection Strip in Tube | | | | Cut Too Short | | | | Misread | Positioned Wrong | | |
| Ripples in Bend | | | | Drill Holes | | | | Offset | Power Loss/Surge | | |
| Torque Waves in Extrusion | | | | Drawing | | | | Out of Calibration | | | |
| Turning Sequence | | | | Finish | | | | Out of Sequence | | | |
| Wave/Twist in Tube | | | | Folio | | | | Outside Dimensions | | | |

Work Order ID 107145

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107145

Page 3

| | | | | | | | |
|-----------------------|----------------------------|------------------------|-------------------------|----------------------|--------------|--------------|--------------|
| Item ID: | D3940-1 | Accept | *N900040100* | Setup | Start | *NS1* | |
| Revision ID: | | | | | Stop | *NS2* | |
| Item Name: | Floor Protector (407) | | | | | | |
| Start Date: | 9/18/13 | Start Qty: 1.00 | *1* | Cust Item ID: | | | |
| Required Date: | 9/23/13 | Req'd Qty: 1.00 | *1* | Customer: | | | |
| Reference: | | | | | | | |
| Approvals: | Process Plan: _____ | Date: _____ | Tooling: _____ | Date: _____ | Run | Start | *NR1* |
| | QC: _____ | Date: _____ | SPC (Y/N): _____ | Date: _____ | Stop | | *NR2* |

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|---|--|------------------------------|-------------------|---------------|----------------------|-----------------------|-----------------------|--------------------------|--|
| 160 *160* QC | QC5- Inspect part completeness to step on W/O Quality Control | 0.00 0.00 | DAS 27 BQ-7 | | | J | | | |
| 170 *170* Packaging Packaging | Identify as per dwg & Stock Location: Memo | 0.00 0.00 | | | | | | | DAS 26 9-89 |
| | | | PPPI07391 | | | | | | 13-10-9 |
| 180 *180* QC | QC21- Final Inspection - Work Order Release Quality Control | 0.00 0.00 | | | | | | | <u>PL/PL</u> 13-10-10 MFC 13-10-09 |

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: Date:

QA Closed: _____ Date: _____

| Work Order: _____ | | | DISPOSITION | | | AGAINST DEPARTMENT/PROCESS | | | | | | | | | | |
|------------------------------|---------|------|---|--|--|--|---|---------------------------------|--------------|--|--|----------------------|---------|--|--|--------------------|
| | | | Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> | Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> | Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> | Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> | | | | | | | | | |
| Part No. _____ | | | | | | | | | | | | | | | | |
| NCR No. _____ | | | | | | | | | | | | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | | | | | | |
| Doc/Data | | | | | | | | | | | | | | | | |
| Equip/Tooling | | | | | | | | | | | | | | | | |
| Operator | | | | | | | | | | | | | | | | |
| Material | | | | | | | | | | | | | | | | |
| Setup | | | | | | | | | | | | | | | | |
| Other | | | | | | | | | | | | | | | | |
| Process | | | | | | | | | | | | | | | | |
| Supplier | | | | | | | | | | | | | | | | |
| Training | | | | | | | | | | | | | | | | |
| Unapproved | | | | | | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | | | | | | |
| Landing Gear | | | | General | | | | | | | | | | | | |
| Bending | General | | | Bend | General | | | Grain | General | | | Ovalized | General | | | Pressure/Forced |
| Centre Not Concentric to O/S | | | | BOM/Route | | | | Hardware | | | | Over/Under tolerance | | | | Temperature/Cure |
| Cracks | | | | Broken/Damaged | | | | Inspection Incomplete | | | | Part Incorrect | | | | Weld |
| Crushed/Crimped | | | | Burrs | | | | Instructions Incomplete/Unclear | | | | Part Lost/Missing | | | | Wrong Stock Pulled |
| Cuffs | | | | Contamination | | | | Maintenance | | | | Part Moved | | | | |
| Heat Treat | | | | Countersink | | | | Mislabeled | | | | Positioned Wrong | | | | |
| Inspection Strip in Tube | | | | Cut Too Short | | | | Misread | | | | Power Loss/Surge | | | | |
| Ripples in Bend | | | | Drill Holes | | | | Offset | | | | | | | | |
| Torque Waves in Extrusion | | | | Drawing | | | | Out of Calibration | | | | | | | | |
| Turning Sequence | | | | Finish | | | | Out of Sequence | | | | | | | | |
| Wave/Twist in Tube | | | | Folio | | | | Outside Dimensions | | | | | | | | |

Picklist Print

September-23-13 11:09:50 AM

Page 1

Work Order ID: 107145

Parent Item: D3940-1

Parent Item Name: Floor Protector (407)

Start Date: 9/18/13

Required Date: 9/23/13

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev. A New Issue 09/02/06 DL
Material 10/04/21 DL

IPP Rev B Add Step 105 Dry

| Component Item ID/ Item Name | Replacement Item ID | Mfg/ Purch | Bin Item | Primary Location | Last Location | Route Seq ID | Unit of Measure | Qty on Hand | Qty per Kit | Total Qty | Qty Issued | Date Issued | Status |
|-----------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
| MLEXS.118-90318-08 Lexan Sheet | | Purchased | No | | | 100 | sf | 288.8680 | 9.03 | 9.03 | | | Dhe |

Location Loc Qty Loc Code

therm 288.868
113127 288.868

9.03

13/10/03

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

| Work Order: _____ | | | DISPOSITION | | AGAINST DEPARTMENT/PROCESS | | | | | |
|-------------------|--|--|---|---|--|---|---------------------------------------|---|--------------|--|
| | | | Rework <input type="checkbox"/> | Scrap <input type="checkbox"/> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | |
| | | | Use-as-is <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coor. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | |
| Part No. _____ | | | Work Order Update <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | |
| NCR No. _____ | | | | | | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | |
| Doc/Data | | | | | | | | | | |
| Equip/Tooling | | | | | | | | | | |
| Operator | | | | | | | | | | |
| Material | | | | | | | | | | |
| Setup | | | | | | | | | | |
| Other | | | | | | | | | | |
| Process | | | | | | | | | | |
| Supplier | | | | | | | | | | |
| Training | | | | | | | | | | |
| Unapproved | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | |
| Landing Gear | General | | | | | | | | | |
| | Bending <input type="checkbox"/> | Bend <input type="checkbox"/> | Grain <input type="checkbox"/> | Ovalized <input type="checkbox"/> | Pressure/Forced <input type="checkbox"/> | | | | | |
| | Centre Not Concentric to O/S <input type="checkbox"/> | BOM/Route <input type="checkbox"/> | Hardware <input type="checkbox"/> | Over/Under tolerance <input type="checkbox"/> | Temperature/Cure <input type="checkbox"/> | | | | | |
| | Cracks <input type="checkbox"/> | Broken/Damaged <input type="checkbox"/> | Inspection Incomplete <input type="checkbox"/> | Part Incorrect <input type="checkbox"/> | Weld <input type="checkbox"/> | | | | | |
| | Crushed/Crimped <input type="checkbox"/> | Burrs <input type="checkbox"/> | Instructions Incomplete/Unclear <input type="checkbox"/> | Part Lost/Missing <input type="checkbox"/> | Wrong Stock Pulled <input type="checkbox"/> | | | | | |
| | Cuffs <input type="checkbox"/> | Contamination <input type="checkbox"/> | Maintenance <input type="checkbox"/> | Part Moved <input type="checkbox"/> | | | | | | |
| | Heat Treat <input type="checkbox"/> | Countersink <input type="checkbox"/> | Mislabeled <input type="checkbox"/> | Positioned Wrong <input type="checkbox"/> | | | | | | |
| | Inspection Strip in Tube <input type="checkbox"/> | Cut Too Short <input type="checkbox"/> | Misread <input type="checkbox"/> | Power Loss/Surge <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | |
| | Ripples in Bend <input type="checkbox"/> | Drill Holes <input type="checkbox"/> | Offset <input type="checkbox"/> | | | | | | | |
| | Torque Waves in Extrusion <input type="checkbox"/> | Drawing <input type="checkbox"/> | Out of Calibration <input type="checkbox"/> | | | | | | | |
| | Turning Sequence <input type="checkbox"/> | Finish <input type="checkbox"/> | Out of Sequence <input type="checkbox"/> | | | | | | | |
| | Wave/Twist in Tube <input type="checkbox"/> | Folio <input type="checkbox"/> | Outside Dimensions <input type="checkbox"/> | | | | | | | |

| | | |
|------------------------------|--------------|-------------|
| DART AEROSPACE LTD | Work Order: | 107145 |
| Description: Floor Protector | Part Number: | D3940-1 |
| Inspection Dwg: D3940 Rev: A | | Page 1 of 1 |

FIRST ARTICLE INSPECTION CHECKLIST

First Article Prototype

THERMOFORMING SECTION

| Description | Accept | Reject | Method of Inspection | Comments |
|---|--------|--------|----------------------|----------|
| Inside Radii less than <u>N/A</u> | | | | |
| Shape Definition | ✓ | | | |
| Texture Retention | ✓ | | | |
| Material imperfections such as bumps, cracks, voids, scratching | ✓ | | | |
| | | | | |
| | | | | |
| | | | | |

Measured by:

DH

Date:

13/10/02

TRIMMING SECTION

| Drawing Dimension | Tolerance | Actual Dimension | Accept | Reject | Method of Inspection | Comments |
|-------------------|-----------|------------------|--------|--------|----------------------|----------|
| 45.8 | REF | 45.8" | ✓ | | | |
| 20.8 | REF | 20.8" | ✓ | | | |
| 0.50 | Min | 0.602" | ✓ | | | |
| 0.62 | Min | 0.66" | ✓ | | | |
| 0.38 | Min | 0.43" | ✓ | | | |
| 0.080 | Min | 0.093" | ✓ | | | |
| 0.050 | Min | 0.058" | ✓ | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Measured by:

DAS/DH

Date:

13/10/03

Audited by:

27
9.99

Date:

13/10/03

Prototype Approval:

N/A

Date:

N/A

| Rev | Date | Change | Revised by | Approved |
|-----|----------|-----------|------------|-----------|
| A | 09.09.17 | New Issue | KJ | <u>AA</u> |

8 1 7 1 6 1 5 1 4 1 3 1 2 1 1

D

D

C

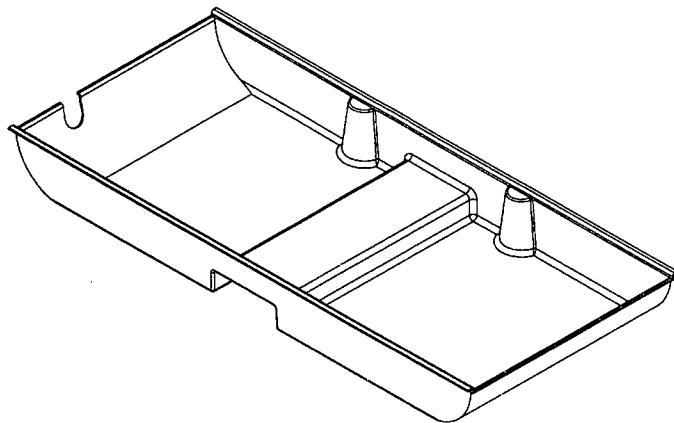
C

B

B

A

A



D3940-1 FLOOR PROTECTOR (407)

107145 MLJ
13-09-24

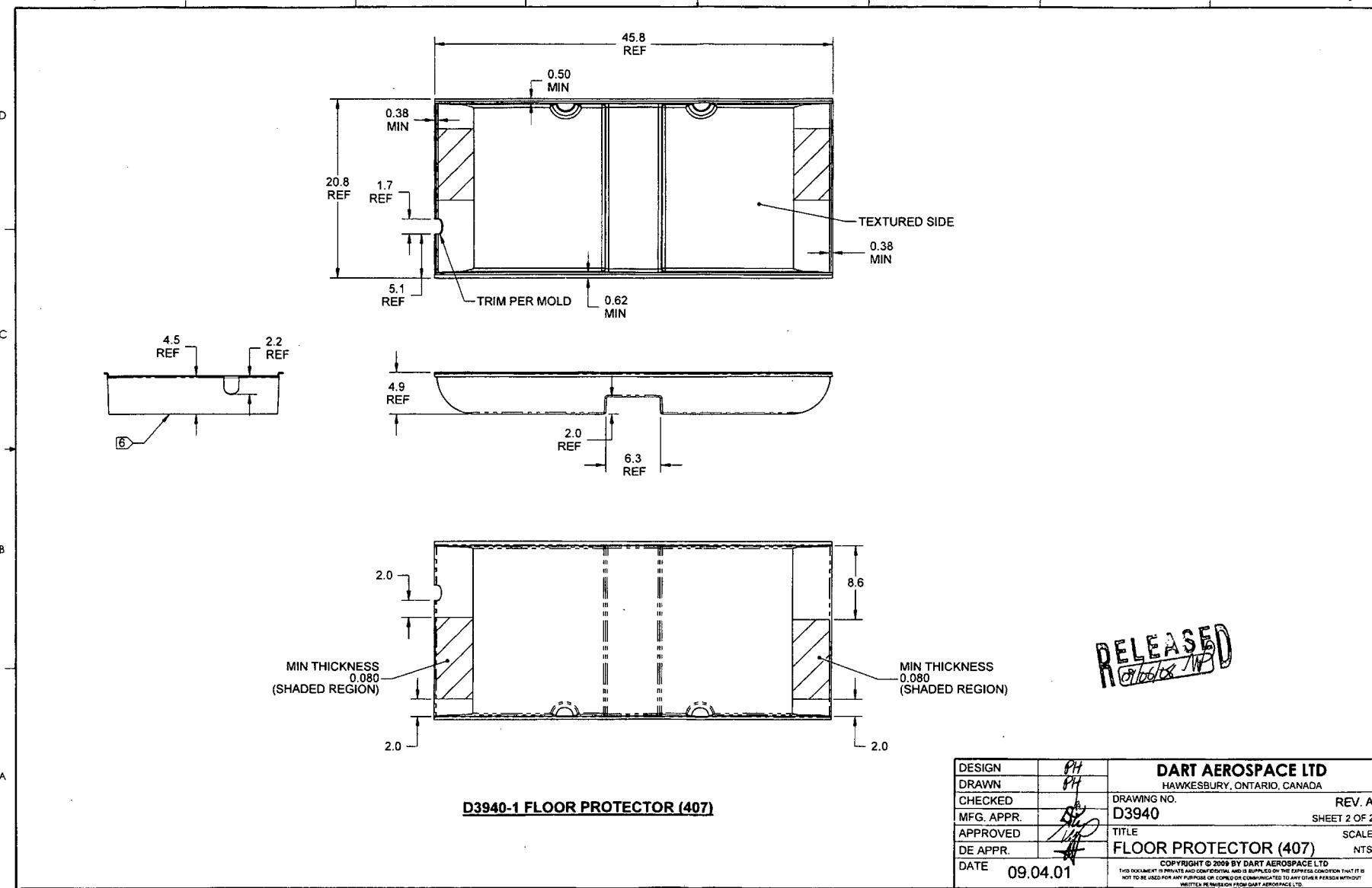
RELEASED
09/09/08 MJD

NOTES:
1) MATERIAL: LEXAN 90318 (PROTECT-A-GLAZE), 0.118 THICK, 112-CLEAR
(MLEXS.118-90318-08)
2) FINISH: NONE
3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
4) UNITS: INCHES UNLESS OTHERWISE NOTED
5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3940-1" USING VIBRATING STYLUS
7) WEIGHT: 4.5 lbs
8) TOOLING: THERMOFORM PER MOLD DT9502 PER DART QSI 022. TRIM PER MOLD
9) MINIMUM THICKNESS: 0.050" EXCEPT AS SHOWN

8 1 7 1 6 1 5 1 4 1 3 1 2 1 1

| A | NEW ISSUE | PH | 09.04.01 |
|------------|-------------|--|--------------|
| REV. | DESCRIPTION | BY | DATE |
| DESIGN | PH | DART AEROSPACE LTD | |
| DRAWN | PH | HAWKESBURY, ONTARIO, CANADA | |
| CHECKED | | DRAWING NO. | REV. A |
| MFG. APPR. | | D3940 | SHEET 1 OF 2 |
| APPROVED | | TITLE | SCALE |
| DE APPR. | | FLOOR PROTECTOR (407) | NTS |
| DATE | 09.04.01 | COPYRIGHT © 2003 BY DART AEROSPACE LTD THIS DOCUMENT IS THE PROPERTY OF DART AEROSPACE LTD. IT IS FOR INTERNAL USE ONLY AND IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD. | |

107145



| | | |
|------------|----------|-----------------------------|
| DESIGN | PH | DART AEROSPACE LTD |
| DRAWN | PH | HAWKESBURY, ONTARIO, CANADA |
| CHECKED | | REV. A |
| MFG. APPR. | | DRAWING NO. D3940 |
| APPROVED | | SHEET 2 OF 2 |
| DE APPR. | | TITLE FLOOR PROTECTOR (407) |
| DATE | 09.04.01 | SCALE NTS |

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